



EVALUATION OF THE INDONESIAN DOCTOR INTERNSHIP PROGRAM AT BHAYANGKARA TK.III HOSPITAL, PALU CITY

Inggrid Tobeli¹, Abdul Rivai², Nuraisyah^{3*}, Dandan Haryono⁴

Universitas Tadulako, Indonesia

*Email Correspondence: nuraisyah121270@gmail.com

ABSTRACT

This study aims to evaluate the Indonesian Doctor Internship Program (PIDI) at Bhayangkara Hospital Class III, Palu City. The evaluation was conducted to determine the effectiveness, efficiency, adequacy, equality, responsiveness, and accuracy of this program. The study used a qualitative method with a purposive approach in selecting informants. Data were collected from five main informants, including interns, supervisors, and patients. The results showed that the effectiveness of the internship program was quite good, especially in improving the competence of new doctors in dealing with clinical situations in the field. However, there were shortcomings in the aspects of efficiency and adequacy, especially in terms of time management and distribution of workload among interns. In addition, although the program's responsiveness to patient needs was quite good, improvements were still needed in terms of communication between interns and patients. The aspect of equality or fairness had been running well, where the distribution of tasks and learning opportunities was quite even among interns. The conclusion of this study is that the Indonesian Doctor Internship Program at Bhayangkara Hospital Class III, Palu City has been running quite well, but still requires some improvements in terms of efficiency and adequacy of training.

Keywords: Evaluation, Internship Program, Competence, Health Services

INTRODUCTION

The Indonesian Doctor Internship Program (PIDI) is one of the government's efforts to improve the quality of medical personnel in Indonesia. This program began in 2010 and aims to provide new doctors with the opportunity to practice the knowledge they have gained during their education directly in the field. PIDI is an important step to bridge the gap between formal education in medical schools and independent practice as licensed doctors.

Based on the 1945 Constitution article 28H and Law Number 36 of 2009 concerning Health, every citizen has the right to receive safe, quality, and affordable health services. Therefore, the professionalism of health workers, especially doctors, is very important to ensure the availability of quality health services. The Indonesian Doctor and Dentist Internship Program is a mandatory

policy of the Ministry of Health for new doctors who graduated from within and outside the country which aims to improve the skills and implementation of professional standards in health services.

The implementation of PIDI is carried out in qualified health care facilities, with a program duration of 12 months, consisting of 8 months in hospitals and 4 months in health centers. During the internship period, new doctors are accompanied by accompanying doctors who act as mentors in various clinical activities. After completing the program, intern doctors receive an Internship Completion Certificate (STSI), which is one of the requirements for obtaining a Practice License (SIP).

Evaluation of the implementation of PIDI is very important to determine the extent to which this program has succeeded in achieving the expected goals, namely



increasing the competence of new doctors in providing quality health services. In the context of the Bhayangkara Hospital Class III of Palu City, PIDI is a strategic program to strengthen health services in the region, especially in terms of providing competent medical personnel.

This study aims to evaluate the implementation of the Indonesian Doctor Internship Program at Bhayangkara Hospital Class III, Palu City, focusing on several main indicators, namely effectiveness, efficiency, adequacy, equality, responsiveness, and accuracy. The results of this study are expected to contribute to the improvement and enhancement of the quality of PIDI, both at Bhayangkara Hospital Class III, Palu City and in other health care facilities.

LITERATURE REVIEW

In public policy evaluation, as applied in the Indonesian Doctor Internship Program, policy evaluation theory plays an important role. Dunn (2004) stated that policy evaluation is not only about assessing whether the policy is successful or failed, but also identifying how the policy can be improved or developed further. Policy evaluation aims to determine how far a policy has achieved its stated goals and whether there has been a positive impact.

Various studies have been conducted to evaluate the implementation of PIDI in various regions in Indonesia. For example, research by Sugiharto and Achadi (2018) stated that one of the biggest challenges in implementing PIDI is the lack of coordination between parties involved in the program, such as the Ministry of Health, educational institutions, and hospitals. This study highlights the importance of a comprehensive evaluation involving various

stakeholders to ensure that this policy can run optimally.

Another study conducted by Hasanah et al. (2013) highlighted the importance of effective mentoring during the internship period, as well as the need for continuous feedback from mentors to ensure that interns can truly improve their skills during the program. The evaluation approach used in this study focused on analyzing the effectiveness and responsiveness of the program to the needs of participants and the community.

METHOD

This study uses a qualitative approach with the aim of gaining an in-depth understanding of the implementation of the Indonesian Doctor Internship Program at Bhayangkara Hospital Class III, Palu City. Data collection techniques used include in-depth interviews, observation, and documentation.

Interviews were conducted with five key informants consisting of interns, accompanying doctors, and several patients who had received services from interns. Informants were selected using purposive sampling techniques, meaning that they were selected based on their relevance to the research topic.

Observations were conducted in various health service units in the hospital, including the emergency unit, polyclinic, and inpatient. The goal was to see firsthand how interns carry out their clinical duties and how they interact with patients and other health workers.

RESULTS AND DISCUSSION

The results of this study identify various aspects of the implementation of the Indonesian Doctor Internship Program (PIDI)



at Bhayangkara Hospital Class III, Palu City based on six dimensions of policy evaluation described by Dunn (2004), namely effectiveness, efficiency, adequacy, equality, responsiveness, and accuracy. Each of these dimensions is analyzed in detail to provide an overview of the success of this program and the challenges faced in its implementation.

Effectiveness

Effectiveness in the context of this internship program refers to the extent to which the program's objectives have been achieved, especially in terms of improving the competence of new doctors. Based on the results of interviews with informants, most stated that this program was quite effective in equipping interns with the clinical skills needed for independent practice. Interns gain direct experience in treating patients with various types of diseases, ranging from minor illnesses to emergency cases that require rapid treatment.

However, some interns felt that their experience was limited to certain routine cases, and were rarely given the opportunity to handle more complex cases. They also felt that the guidance provided by senior doctors was sometimes less intensive, especially during busy times in the hospital. This affected their level of confidence when having to handle more difficult cases.

Overall, the effectiveness of this program can be said to be quite good, but there is still room for improvement, especially in terms of more diverse distribution of clinical experiences and improved mentoring.

Efficiency

Efficiency in implementing internship programs at Bhayangkara Hospital Class III

Palu City still needs to be improved. One of the main problems identified is time management between interns and supervising doctors. Several interns complained that they had to wait too long to get guidance from senior doctors, especially when the hospital was busy. This caused delays in patient care and reduced work efficiency.

In addition, the use of resources, including medical equipment, is also a concern. Several informants noted that not all interns are accustomed to using the equipment available in the hospital. There is a need for additional training in the use of certain equipment so that interns can work more effectively and efficiently.

In terms of administration, interns are often given the responsibility to complete administrative tasks that are not directly related to their clinical training. This results in wasted time that should be used for clinical learning, reducing the efficiency of the program.

Adequacy

The adequacy aspect relates to the extent to which the internship program is able to meet the needs of participants in terms of clinical training and competency development. Based on the results of the interviews, several intern doctors felt that the duration of training in certain units, such as the emergency unit and polyclinic, was still inadequate. They felt that the time given to learn various skills in these units was too short, so that they were not fully prepared when they had to handle more complex cases.

The adequacy of the program also relates to the readiness of the interns to deal with various clinical conditions. Although the program has provided good basic



training, some interns felt that they still needed more learning in terms of handling specific cases that they rarely encountered during their internship. They suggested that the program provide more time for training in units with more complex cases, as well as providing special training that focuses on these cases.

Equity or Justice

Equity or fairness in the internship program refers to the distribution of tasks and learning opportunities among interns. Interview results showed that most participants felt that the program had provided relatively equal opportunities for them to learn and handle clinical cases. Each intern had equal access to various health service units in the hospital, and they had the opportunity to participate in various medical procedures.

However, there were some complaints about the distribution of workload. Some interns felt that they were often given more administrative tasks than their colleagues, reducing their time to learn clinical skills. On the other hand, there were interns who felt that they were more often placed on less challenging units, which made their clinical experience less varied.

However, overall, the program is considered quite fair in terms of the distribution of learning opportunities, but there needs to be better regulation regarding the administrative workload.

Responsiveness (Responsiveness)

Responsiveness refers to the extent to which the program is able to respond to the needs of participants and patients. Based on the results of the interviews, the intern doctors were generally considered quite responsive to the needs of patients. They

were able to provide fast and responsive services, especially in emergency situations. Patients were satisfied with the services provided, although there were some complaints about unclear communication.

Some interns also admitted that they found it difficult to explain the patient's health condition in a way that was easily understood by less educated patients. This suggests that there is a need to improve the communication skills of interns so that they are better able to interact with patients from various social and educational backgrounds.

In terms of responsiveness to participant needs, the program is considered quite good, especially in providing extensive access to interns to participate in various clinical activities. However, improvements in communication between interns and patients need to be a major concern.

Appropriateness

Appropriateness refers to the extent to which the internship program is in line with the needs of the community and participants. Based on the results of the study, the internship program at the Bhayangkara Hospital Class III, Palu City was considered quite appropriate in meeting the training needs of new doctors. Participants felt that this program gave them a good opportunity to prepare themselves before starting independent practice.

However, some interns felt that the training provided was sometimes too theoretical and not always relevant to the clinical conditions they face every day. They suggested that the program should focus more on practical skills that can be directly applied in clinical practice, such as emergency case management and the use of the latest medical technology.



In terms of program fidelity, participants felt that the main objective of the program had been achieved, which was to provide useful clinical experience for new physicians. However, improvements in terms of the relevance of clinical training to real-world conditions are still needed.

CONCLUSION

Evaluation of the Indonesian Doctor Internship Program at Bhayangkara Hospital Class III, Palu City shows that the program has been running quite well, but there are still some aspects that need to be improved to improve the quality of its implementation. Based on the results of the study, the program is quite effective in equipping new doctors with the clinical skills needed, although there are still some shortcomings in terms of efficiency and adequacy of training. The distribution of workload and learning opportunities is considered quite fair, but better arrangements are needed to ensure that all intern doctors get balanced clinical experience.

The program's responsiveness to the needs of patients and interns was considered good, but improvements in communication between interns and patients are still needed. In addition, the program was considered quite appropriate in meeting the training needs of new doctors, but improvements in the relevance of clinical training to real conditions in the field still need to be made.

By making improvements in these various aspects, it is hoped that future internship programs can make a greater contribution to improving the quality of medical personnel in Indonesia.

REFERENCES

- Achmad, 2015. Metode Penelitian Administrasi Publik Teori dan Aplikasi. Gava Media, Yogyakarta.
- Achmad, Rucky S. 2002. Sistem Manajemen Kinerja. PT. Gramedia Pustaka Utama, Jakarta.
- Ade Irwanto, Fakhrudin Razy. 2021. Pertanggungjawaban Hukum Dokter Program Internsip Dalam Pelayanan Kesehatan Terhadap Pasien.
- Adhie, S. 2005. Terorisme. Jakarta: Pustaka Sinar Harapan.
- Anggara, 2016. Administrasi Pembangunan (Teori dan Praktik). Pustaka Setia, Bandung.
- Anggara, 2018. Ekologi Administrasi (Holistik, Kontemporer, dan Kontekstual). Pustaka Setia, Bandung.
- Bertens, K. 2011. Etika Bio Medis. Yogyakarta: Atma Jaya.
- Despitasi, M., Mubasyiroh, R., & Hendarwan, H. 2011. Asesmen Program Internsip Dokter Indonesia Di Sumatera Barat Tahun 2011. Pusat Teknologi Intervensi Kesehatan Masyarakat, Jakarta.
- Fourianalistyawati, E. 2012. Komunikasi Yang Relevan Dan Efektif Antara Dokter Dan Pasien. Journal Psikogenesis, 1(1), 82–87.
- Hasanah, S. N., Despitasi, M., & Hendarwan, H. 2013. Peningkatan Kompetensi Dokter Pasca-Program Internship Dokter Indonesia (PIDI) Tahun 2013. Pusat Penelitian dan Pengembangan Sumber Daya dan Pelayanan Kesehatan Badan Litbangkes Kemenkes RI, Jakarta.



- Indiahono, 2009. *Perbandingan Administrasi Publik: Model, Konsep, dan Aplikasi*. Gava Media, Yogyakarta.
- Keban, 2012. *Enam Dimensi Strategis Administrasi Publik: Konsep, Teori dan Isu*. Gava Media, Yogyakarta.
- Kemkes RI. 2010a. *Peraturan Konsil Kedokteran Indonesia Nomor: 1/KKUPER/U2010 Tentang Registrasi Dokter Program Internsip*. Jakarta: Kementerian Kesehatan RI.
- Kemkes RI. 2010b. *Pedoman Wahana Internsip Dokter Indonesia*. Jakarta: Kementerian Kesehatan RI.
- Komalawati, V., & Kurniawan, D. *Kompetensi Dan Kewenangan Praktik Kedokteran: Perspektif Hukum Di Indonesia*. Fakultas Hukum, Universitas Padjajaran, Bandung.
- Kumorotomo, Wahyudi. 1992. *Etika Administrasi Negara*. Raja Grafindo Persada, Jakarta.
- Mahmudi. 2005. *Manajemen Kinerja Sektor Publik*. Unit Penerbit dan Percetakan Akademi Manajemen Perusahaan YKPN, Yogyakarta.
- Miles, Matthew B., & Huberman, A. Michael. 2014. *Analisis Data Kualitatif: Buku Sumber Tentang Metode-metode Baru*. UI-Press.
- Moleong, Lexy J. 2005. *Metodologi Penelitian Kualitatif*. PT. Remaja Rosdakarya, Bandung.
- Nasution, B. J. 2005. *Hukum Kesehatan Pertanggungjawaban Dokter*. Jakarta: Rineka Cipta.
- Perwita, Anak Agung Banyu. 2007. *Keamanan Nasional: Kebutuhan Membangun Perspektif Integratif Versus Pembiaran Politik dan Kebijakan*. Jakarta: Pro Patria.
- Purwanto, Wawan H. 2004. *Terorisme Ancaman Tiada Akhir*. Jakarta: Grafindo.
- Sembiring, Masana. 2012. *Budaya dan Kinerja Organisasi*. Fokus Media, Bandung.
- Simanjuntak, Payaman J. 2005. *Manajemen dan Evaluasi Kerja*. Fekon UI, Jakarta.
- Sooewono, H. 2007. *Batas Pertanggung Jawaban Hukum Malpraktek Dokter*. Surabaya: Srikandi.
- Sugiharto, F., & Achadi, A. 2018. Analisis Kebijakan Pemahiran Lulusan Dokter Melalui Program Internsip Dokter Indonesia. *Jurnal Kebijakan Kesehatan Indonesia, JKKI* 7(1), 26–33.
- Sugiyono. 2005. *Metode Penelitian*. Alfabeta, Bandung.
- Sukohar, A., Sibero, H. T., & Ratna, M. G. 2015. Penyuluhan Mediasi Sengketa Medik Pada Dokter Yang Akan Diambil Sumpah di Fakultas Kedokteran Unila. *JPM Ruwa JURAI*, 1(1), 71–74.
- Syafiie Kencana Ini, Djamaldin Tanjung, & Supardan Modeong. 1999. *Ilmu Administrasi Publik*. Jakarta: PT. Rineka Cipta.
- Yunianti, S., & Darmawan, E. S. 2023. Kebijakan Adaptasi Dokter Spesialis Warga Negara Indonesia Lulusan Luar Negeri Di Fasilitas Pelayanan Kesehatan. *Jurnal Cahaya Mandalika (JCM)*.